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**AUG 16 2007**

## **FERENCE & ASSOCIATES LLC**

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### **USPTO FACSIMILE COVER SHEET**

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To: Commissioner for Patents  
Fax Number: (571) 273-8300  
Date: August 16, 2007  
Pages: 21 pages (including this cover sheet)

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**MESSAGE:**

**METHOD OF PAYMENT BY MEANS OF AN ELECTRONIC COMMUNICATION DEVICE**

Application No. 09/752,959  
Examiner Akintola, Olabode  
Art Unit 3691

Amendment Transmittal  
Petition and Fee for Extension of Time  
Amendment

DE919990077  
(590.161)

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FERENCE & ASSOCIATES LLC  
Amendment Transmittal

Atty. Docket No. DE9-1999-0077  
(590.161)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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AUG 16 2007

In re Application of : Hansmann et al.  
Serial No. : 09/752,959 Examiner : Akintola, Olabode  
Filed : April 26, 2001 Group Art Unit : 3624  
For : METHOD OF PAYMENT BY MEANS OF AN ELECTRONIC  
COMMUNICATION DEVICE

HON. COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

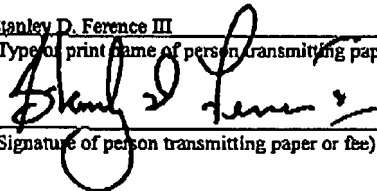
Transmitted herewith is an Amendment in the above-identified application.

1. ☒ Applicant requests an extension of time to respond to the outstanding Office Action. A Petition for an extension of time is enclosed.
- OR
2. ☐ In the event that an extension of time is required, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.
3. ☐ Small Entity status of this application has been established by a verified statement previously submitted.
4. ☐ A verified statement to establish Small Entity status is enclosed.

CERTIFICATE OF TRANSMISSION

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being facsimile transmitted on (571) 273-8300 on August 16, 2007 to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Stanley D. Ference III  
(Type or print name of person transmitting paper or fee)

  
(Signature of person transmitting paper or fee)

Page 1 of 2

FERENCE & ASSOCIATES LLC  
Amendment Transmittal

Any. Docket No. DE9-1999-0077  
(590.161)

5. ☐ Also enclosed: \_\_\_\_\_
6. ☒ No additional filing fee is required.
7. ☒ The filing fee has been calculated as shown below:

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AUG 16 2007

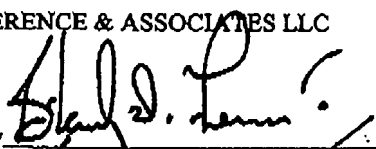
	Claims Remaining After Amendment (Col. 1)	Highest No. Prev. paid for (Col. 2)	Present Extra (Col. 3)	SMALL ENTITY		OTHER THAN A SMALL ENTITY	
				RATE	FEE	RATE	FEE
Total Claims	14	** 20	= * 0	x \$25	-	OR x \$50	-
Ind. Claims	3	*** 3	= * 0	x \$100	-	OR x \$200	-
<input type="checkbox"/> Multiple Dependent Claim Presented				+ \$180	-	OR + \$360	-
				<b>TOTAL</b>	- \$ _____	OR	<b>TOTAL</b> - \$ _____

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.  
 \*\* If the "Highest No. Prev. paid for" in this space is less than 20, write "20" in this space.  
 \*\*\* If the "Highest No. Prev. paid for" in this space is less than 3, write "3" in this space.

8. ☐ Applicant encloses herewith a check for \$\_\_\_\_\_ to cover the filing fee.
9. ☐ The Commissioner is hereby authorized to charge the \$\_\_\_\_\_ filing fee to Deposit Account No. 50-0510.
10. ☒ The Commissioner is hereby authorized to charge payment of any additional filing fees associated with this communication or credit any overpayment to Deposit Account No. 50-0510.

Respectfully submitted,

FERENCE & ASSOCIATES LLC

By   
Stanley D. Ference III  
Reg. No. 36,879

Dated: August 16, 2007

Mailing Address:

Customer No. 47049  
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